

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Fairfax County Democratic Committee

ADDRESS (number and street)

2815 Hartland Rd Suite 100

☐Check if different
than previously
reported. (ACC)

Falls Church

VA

22043

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00277541

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2009

through

01

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Bruce H Neilson

Signature of Treasurer

Electronically Filed by Mr. Bruce H Neilson

Date

08

24

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

This amendment number 2 is required to reclassify an income item which affects cumulative income totals in lines 11(a) and 11(c) of our reports. In 2009, the Fairfax County Democratic Committee enters the year with no federal candidates on the ballot, unless a vacancy in a federal elected office gives rise to a special election. The Committee will continue to file monthly reports in 2009 due to paid staff that devote more than 25 percent of their compensated time to federal elections. The full cost of paid staff is reported as FEA on Schedule B supporting line 30(b) of our report. The Committee does not raise funds for any federal candidate. Fund raising is exclusively for the benefit of the Fairfax County Democratic Committee. So all expenses reported for fund raising involve party fund raising only. Virtually all activities of the Fairfax County Democratic Committee in 2009 will focus on state and local (non-federal) elections, unless the occasion arises for a special election involving a federal candidate. The Committee began allocating administrative expenses in June 2008; however, shortages of funds in our non federal account prevent us from transferring non federal account funds to our federal account to offset shared administrative expenses. Once the non federal account balance is adequate to make these transfers in 2009, then the transfers will resume. Meanwhile, all administrative expenses of the committee will be paid 100 percent with federal funds. Amendment number 1 to this report was to align the corrected cumulative balance with previously amended monthly reports from 2008. In addition, certain disbursements were restated to clarify the purposes of the expenses, or to correct errors in original classifications.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 55

Write or Type Committee Name
Fairfax County Democratic Committee

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1 | 2009 | 139840.84 |
| (b) Cash on Hand at Beginning of Reporting Period | 139840.84 | |
| (c) Total Receipts (from Line 19) | 36026.21 | 36026.21 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 175867.05 | 175867.05 |
| 7. Total Disbursements (from Line 31) | 64019.56 | 64019.56 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 111847.49 | 111847.49 |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Fairfax County Democratic Committee

Report Covering the Period:

From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

To:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) | 14355.00 | 14355.00 |
| (ii) Unitemized | 20585.00 | 20585.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 34940.00 | 34940.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 1070.00 | 1070.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 36010.00 | 36010.00 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.55 | 0.55 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | -300.00 | -300.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 315.66 | 315.66 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 36026.21 | 36026.21 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 36026.21 | 36026.21 |

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|----------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| (i) Federal Share..... | 0.00 | 0.00 | |
| (ii) Non-Federal Share..... | 0.00 | 0.00 | |
| (b) Other Federal Operating Expenditures..... | 49499.67 | 49499.67 | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡ | 49499.67 | 49499.67 | |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 | |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 | |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 | |
| 26. Loan Repayments Made..... | 0.00 | 0.00 | |
| 27. Loans Made..... | 0.00 | 0.00 | |
| 28. Refunds of Contributions To: | | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 | |
| (b) Political Party Committees | 0.00 | 0.00 | |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 | |
| 29. Other Disbursements..... | 6300.00 | 6300.00 | |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | | |
| (i) Federal Share | 0.00 | 0.00 | |
| (ii) "Levin" Share | 0.00 | 0.00 | |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 8219.89 | 8219.89 | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 8219.89 | 8219.89 | |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 64019.56 | 64019.56 | |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 64019.56 | 64019.56 | |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 36010.00 | 36010.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 36010.00 | 36010.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 49499.67 | 49499.67 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.55 | 0.55 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 49499.12 | 49499.12 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Roy J Baldwin

Mailing Address 2915 Hunter Mill Rd
Ste 18

City State Zip Code
Oakton VA 22124-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Baldwin Law Firm, LLC

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C4089769

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

Roy J Baldwin

Mailing Address 2915 Hunter Mill Rd
Ste 18

City State Zip Code
Oakton VA 22124-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Baldwin Law Firm, LLC

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 2 / 2 0 0 9

Transaction ID: C4090661

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Eleanor Bissell Bochner

Mailing Address 9402 Colonnade Dr

City State Zip Code
Vienna VA 22181-6118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091640

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

520.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Eleanor Bissell Bochner

Mailing Address 9402 Colonnade Dr

City

Vienna

State

VA

Zip Code

22181-6118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091642

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Jon Bowerbank

Mailing Address 194 Willow Brook Dr

City

Rosedale

State

VA

Zip Code

24280-3622

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMATS, Inc.

Occupation
Company owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091368

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Amy Ludwiczak Bowman

Mailing Address 8927 Fort Hunt Rd

City

Alexandria

State

VA

Zip Code

22308-2636

FEC ID number of contributing
federal political committee.

C

Name of Employer
Law Office of Amy L. Bowman, P.C.

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 8 / 2 0 0 9

Transaction ID: C4090000

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

2225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Amy Ludwiczak Bowman

Mailing Address 8927 Fort Hunt Rd

City

Alexandria

State

VA

Zip Code

22308-2636

FEC ID number of contributing
federal political committee.

C

Name of Employer
Law Office of Amy L. Bowman, P.C.

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 9 / 2 0 0 9

Transaction ID: C4090279

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Charlotte Anne Camp

Mailing Address 6009 Coffey Woods Ct

City

Burke

State

VA

Zip Code

22015-2901

FEC ID number of contributing
federal political committee.

C

Name of Employer
NA

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 4 / 2 0 0 9

Transaction ID: C4090905

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

Barbara Lee Caputo

Mailing Address 12304 Westwood Hills Dr

City

Herndon

State

VA

Zip Code

20171-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
automation consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 0 9

Transaction ID: C4092474

Amount of Each Receipt this Period

360.00

SUBTOTAL of Receipts This Page (optional)

660.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Joseph Cox

Mailing Address 4215 Stackler Dr

City

Fairfax

State

VA

Zip Code

22030-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer
Catapult Consultants, LLC

Occupation

Consultant / CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 6 / 2 0 0 9

Transaction ID: C4090898

Amount of Each Receipt this Period

260.00

B.

Full Name (Last, First, Middle Initial)

Creigh Deeds

Mailing Address PO Box 533

City

Richmond

State

VA

Zip Code

23218-0533

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senate of VA

Occupation

Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 2 / 2 0 0 9

Transaction ID: C4090438

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Christine Ann Delta

Mailing Address 6619 Goldsboro Rd

City

Falls Church

State

VA

Zip Code

22042-4131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 9 / 2 0 0 9

Transaction ID: C4089965

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

985.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Michele M Duell

Mailing Address 7413 Grace St

City

Springfield

State

VA

Zip Code

22150-3916

FEC ID number of contributing
federal political committee.

C

Name of Employer
Apptis

Occupation
VP

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091806

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Ronald L England

Mailing Address 7504 Woodside Ln
Apt 24

City

Lorton

State

VA

Zip Code

22079-2011

FEC ID number of contributing
federal political committee.

C

Name of Employer
BearingPoint

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 8 / 2 0 0 9

Transaction ID: C4092497

Amount of Each Receipt this Period

360.00

C.

Full Name (Last, First, Middle Initial)

John William Foust

Mailing Address 7822 Swinks Mill Ct

City

McLean

State

VA

Zip Code

22102-2416

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 2 / 2 0 0 9

Transaction ID: C4089754

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

680.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

John William Foust

Mailing Address 7822 Swinks Mill Ct

City

McLean

State

VA

Zip Code

22102-2416

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 6 / 2 0 0 9

Transaction ID: C4089946

Amount of Each Receipt this Period

175.00

B.

Full Name (Last, First, Middle Initial)

Marc Alan Greidinger

Mailing Address 8306 Uxbridge Ct

City

Springfield

State

VA

Zip Code

22151-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091330

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

Joyce H Henry-Schargorodski

Mailing Address 6208 Sudley Church Ct

City

Fairfax Station

State

VA

Zip Code

22039-1225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Schargorodski & Associates
PLC (Law Of

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091363

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)

775.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Mary Ann Hovis

Mailing Address 2700 Green Holly Springs Ct

City

Oakton

State

VA

Zip Code

22124-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation

Marketing Ex

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 3 / 2 0 0 9

Transaction ID: C4092435

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Mary Ann Hovis

Mailing Address 2700 Green Holly Springs Ct

City

Oakton

State

VA

Zip Code

22124-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation

Marketing Ex

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 7 / 2 0 0 9

Transaction ID: C4092480

Amount of Each Receipt this Period

360.00

C.

Full Name (Last, First, Middle Initial)

Mark L Itzkoff

Mailing Address 6114 Emmett Guards Ct

City

Fairfax Station

State

VA

Zip Code

22039-1302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Olsson frank weeda

Occupation

attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091510

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

810.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Mark L Itzkoff

Mailing Address 6114 Emmett Guards Ct

City

Fairfax Station

State

VA

Zip Code

22039-1302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Olsson frank weedaOccupation
attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 1 / 2 0 0 9

Transaction ID: C4091854

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mark L Itzkoff

Mailing Address 6114 Emmett Guards Ct

City

Fairfax Station

State

VA

Zip Code

22039-1302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Olsson frank weedaOccupation
attorney

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 8 / 2 0 0 9

Transaction ID: C4092525

Amount of Each Receipt this Period

180.00

C.

Full Name (Last, First, Middle Initial)

Peter Kaldes

Mailing Address 6677 Hanson Ln

City

Lorton

State

VA

Zip Code

22079-1367

FEC ID number of contributing
federal political committee.

C

Name of Employer
Weil Gotshal & MangesOccupation
Attorney

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 8 / 2 0 0 9

Transaction ID: C4092495

Amount of Each Receipt this Period

360.00

SUBTOTAL of Receipts This Page (optional)

565.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Drew Alan Kleibrink

Mailing Address 7223 Timber Ln

City

Falls Church

State

VA

Zip Code

22046-2733

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nova Benefits

Occupation

Employee Benefit Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 2 / 2 0 0 9

Transaction ID: C4090795

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

William Edward Lahue

Mailing Address 9825 Laurel St

City

Fairfax

State

VA

Zip Code

22032-1110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 9 / 2 0 0 9

Transaction ID: C4090330

Amount of Each Receipt this Period

450.00

C.

Full Name (Last, First, Middle Initial)

Suchada Vichitakul Langley

Mailing Address 2435 Flint Hill Rd

City

Vienna

State

VA

Zip Code

22181-5448

FEC ID number of contributing
federal political committee.

C

Name of Employer
usda

Occupation

economist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 7 / 2 0 0 9

Transaction ID: C4092477

Amount of Each Receipt this Period

360.00

SUBTOTAL of Receipts This Page (optional)

1110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Besra Laws

Mailing Address 3203 Graham Rd

City

Falls Church

State

VA

Zip Code

22042-3735

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Store Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091768

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Walter John Mika, Jr

Mailing Address 5612 Eastbourne Dr

City

Springfield

State

VA

Zip Code

22151-1607

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fairfax County Public Sch-
ools

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C4092494

Amount of Each Receipt this Period

360.00

C.

Full Name (Last, First, Middle Initial)

Patricia A Millett

Mailing Address 4601 Millburn Ct

City

Alexandria

State

VA

Zip Code

22309-3165

FEC ID number of contributing
federal political committee.

C

Name of Employer
Akin, Gump, Strauss, Hauer
& Feld LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091333

Amount of Each Receipt this Period

650.00

SUBTOTAL of Receipts This Page (optional)

1310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Patrick Joseph Morrison

Mailing Address 6804 Jackson Ave

City

Falls Church

State

VA

Zip Code

22042-1910

FEC ID number of contributing
federal political committee.

C

Name of Employer
International Association
of Fire Figh

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

AGP Education and Training

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C4089766

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Lina E Orr

Mailing Address 9409 Old Courthouse Rd

City

Vienna

State

VA

Zip Code

22182-2052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed (RLO Associ-
ates)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Business Owner

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 2 / 2 0 0 9

Transaction ID: C4092415

Amount of Each Receipt this Period

1200.00

C.

Full Name (Last, First, Middle Initial)

Vickie Lee Plunkett

Mailing Address 4432 Sleaford Rd

City

Annandale

State

VA

Zip Code

22003-3925

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. House of Representat-
ives, Washing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Staffer for Armed Services Committee

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: C4093149

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Nancy Angland Rice

Mailing Address 2217 Halcyon Ln

City

Vienna

State

VA

Zip Code

22181-3042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091643

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Nancy Alexander Simmons

Mailing Address 6112 Emmett Guards Ct

City

Fairfax Station

State

VA

Zip Code

22039-1302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 6 / 2 0 0 9

Transaction ID: C4127407

Amount of Each Receipt this Period

1000.00

* In-Kind: donated space
for party fundraiser

C.

Full Name (Last, First, Middle Initial)

Laura Austin Sonnenmark

Mailing Address 9114 Volunteer Dr

City

Alexandria

State

VA

Zip Code

22309-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 7 / 2 0 0 9

Transaction ID: C4089992

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Steven David Stone

Mailing Address 3608 Oakland Dr

City

Alexandria

State

VA

Zip Code

22310-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stone Associates

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 0 9

Transaction ID: C4092421

Amount of Each Receipt this Period

350.00

B.

Full Name (Last, First, Middle Initial)

Robert John Surovell

Mailing Address 7732 Tauxemont Rd

City

Alexandria

State

VA

Zip Code

22308-1055

FEC ID number of contributing
federal political committee.

C

Name of Employer
Surovell Markle Isaacs &
Levy PLC

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 6 / 2 0 0 9

Transaction ID: C4091265

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Robert John Surovell

Mailing Address 7732 Tauxemont Rd

City

Alexandria

State

VA

Zip Code

22308-1055

FEC ID number of contributing
federal political committee.

C

Name of Employer
Surovell Markle Isaacs &
Levy PLC

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091804

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 55

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Scott A. Surovell

Mailing Address 7739 Tauxemont Rd

City

Alexandria

State

VA

Zip Code

22308-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Surovell Markle Isaacs &
Levy PLC

Occupation
Attorney

Receipt For: 2009

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 4 / 2 0 0 9

Transaction ID: C4090855

Amount of Each Receipt this Period

5.00

B.

Full Name (Last, First, Middle Initial)

Scott A. Surovell

Mailing Address 7739 Tauxemont Rd

City

Alexandria

State

VA

Zip Code

22308-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Surovell Markle Isaacs &
Levy PLC

Occupation
Attorney

Receipt For: ☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091594

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Scott A. Surovell

Mailing Address 7739 Tauxemont Rd

City

Alexandria

State

VA

Zip Code

22308-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Surovell Markle Isaacs &
Levy PLC

Occupation
Attorney

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 1 / 2 0 0 9

Transaction ID: C4091805

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 21 / 55

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Scott A. Surovell

Mailing Address 7739 Tauxemont Rd

City

Alexandria

State

VA

Zip Code

22308-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Surovell Markle Isaacs &
Levy PLC

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 8 / 2 0 0 9

Transaction ID: C4092475

Amount of Each Receipt this Period

180.00

B.

Full Name (Last, First, Middle Initial)

Karen M Harris Tate

Mailing Address 11920 Richland Ln

City

Oak Hill

State

VA

Zip Code

20171-1516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fairfax County Public Sch-
ools

Occupation
Instructional Assistant Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091727

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

405.00

TOTAL This Period (last page this line number only)

14355.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 55

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Jody Wagner for Lt. Gov.

Mailing Address PO Box 1508

City

Virginia Beach

State

VA

Zip Code

23451-9508

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 2 / 2 0 0 9

Transaction ID: C4089694

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

Sheet Metal Workers' International Assoc

Mailing Address 1750 New York Avenue NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C

C00007542

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091677

Amount of Each Receipt this Period

350.00

C.

Full Name (Last, First, Middle Initial)

Sheet Metal Workers' International Assoc

Mailing Address 1750 New York Avenue NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C

C00007542

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 2 / 2 0 0 9

Transaction ID: C4092146

Amount of Each Receipt this Period

-350.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 55

(check only one)

| | | | |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Virginia Leadership Pac Multi-Candidate Committee

Mailing Address 800 So St Asaph St 301

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.**C**

C00378356

Name of Employer

Occupation

Receipt For:

☐

☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 2 | 9 | | 2 | 0 | 9 | |

Transaction ID: C4093156

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1070.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 55

(check only one)

| | | | |
|------------------------------|------------------------------|--|---|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input checked="" type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Virginia Commerce Bank

Mailing Address 5350 Lee Hwy

City

Arlington

State

VA

Zip Code

22207-1608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

316.21

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 2 | 2 | | 2 | 0 | 9 | |

Transaction ID: C4096242

Amount of Each Receipt this Period

0.55

Adjusting entry to bank
deposit

SUBTOTAL of Receipts This Page (optional)

0.55

TOTAL This Period (last page this line number only)

0.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 55

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Lofton Fairchild

Mailing Address 4619 Pontchartrain Dr

City

Slidell

State

LA

Zip Code

70458-5512

FEC ID number of contributing
federal political committee.

C

Name of Employer
Elite Air Systems

Occupation

Air Conditioner Repairperson

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

-300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C4094786

Amount of Each Receipt this Period

-300.00

Individual contribution
returned.

SUBTOTAL of Receipts This Page (optional)

-300.00

TOTAL This Period (last page this line number only)

-300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 55

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Virginia Commerce Bank

Mailing Address 5350 Lee Hwy

City

Arlington

State

VA

Zip Code

22207-1608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.21

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 6 / 2 0 0 9

Transaction ID: C4096245

Amount of Each Receipt this Period

90.00

Adjusting entry to correct
a bank deposit

B.

Full Name (Last, First, Middle Initial)

Virginia Commerce Bank

Mailing Address 5350 Lee Hwy

City

Arlington

State

VA

Zip Code

22207-1608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.21

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C4093978

Amount of Each Receipt this Period

225.66

SUBTOTAL of Receipts This Page (optional)

315.66

TOTAL This Period (last page this line number only)

315.66

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Advantage Business Payroll

Mailing Address Auburn Branch P O Box 1330 Auburn

City
Auburn

State
ME

Zip Code
04211-1330

Purpose of Disbursement
payroll processing fee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212047

Date of Disbursement

01 / 15 / 2009

Amount of Each Disbursement this Period

58.22

B.

Full Name (Last, First, Middle Initial)

Advantage Business Payroll

Mailing Address Auburn Branch P O Box 1330 Auburn

City
Auburn

State
ME

Zip Code
04211-1330

Purpose of Disbursement
payroll processing fee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212068

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

132.22

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 360001

City
Ft Lauderdale

State
FL

Zip Code
33336-0001

Purpose of Disbursement
credit card discount

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212067

Date of Disbursement

01 / 28 / 2009

Amount of Each Disbursement this Period

3.10

SUBTOTAL of Disbursements This Page (optional)

193.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|-------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) American Express | Transaction ID: D212054 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 360001 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 2 | 0 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 2 | 0 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card discount Candidate Name | <table border="1"> <tr> <td colspan="10">71.30</td> </tr> </table> | 71.30 | | | | | | | | | | | | | | | | | | | |
| 71.30 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) American Express | Transaction ID: D212055 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 360001 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 2 | 0 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 2 | 0 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card discount Candidate Name | <table border="1"> <tr> <td colspan="10">14.73</td> </tr> </table> | 14.73 | | | | | | | | | | | | | | | | | | | |
| 14.73 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) American Express | Transaction ID: D212056 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 360001 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 2 | 1 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 2 | 1 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card discount Candidate Name | <table border="1"> <tr> <td colspan="10">13.96</td> </tr> </table> | 13.96 | | | | | | | | | | | | | | | | | | | |
| 13.96 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

99.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|-------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) American Express | Transaction ID: D212064 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 360001 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 2 | 6 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 2 | 6 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card discount Candidate Name | <table border="1"> <tr> <td colspan="10">0.78</td> </tr> </table> | 0.78 | | | | | | | | | | | | | | | | | | | |
| 0.78 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) American Express | Transaction ID: D212083 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 360001 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 3 | 0 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 3 | 0 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card discount Candidate Name | <table border="1"> <tr> <td colspan="10">11.16</td> </tr> </table> | 11.16 | | | | | | | | | | | | | | | | | | | |
| 11.16 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) American Express | Transaction ID: D212051 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 360001 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 1 | 5 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 1 | 5 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card discount Candidate Name | <table border="1"> <tr> <td colspan="10">12.72</td> </tr> </table> | 12.72 | | | | | | | | | | | | | | | | | | | |
| 12.72 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

24.66

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | | | | | | | | | | | | | | | | | | | | | |
|--|--|-------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|--|
| A. Full Name (Last, First, Middle Initial) American Express | Transaction ID: D212052 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 360001 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 1 | 6 | | 2 | 0 | 9 | |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 1 | 6 | | 2 | 0 | 9 | | | | | | | | | | | | | |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card discount Candidate Name | <table border="1"> <tr> <td colspan="10">15.04</td> </tr> </table> | 15.04 | | | | | | | | | | | | | | | | | | | |
| 15.04 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) American Express | Transaction ID: D212042 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 360001 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 1 | 2 | | 2 | 0 | 9 | |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 1 | 2 | | 2 | 0 | 9 | | | | | | | | | | | | | |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card discount Candidate Name | <table border="1"> <tr> <td colspan="10">9.30</td> </tr> </table> | 9.30 | | | | | | | | | | | | | | | | | | | |
| 9.30 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) American Express | Transaction ID: D212043 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 360001 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 1 | 2 | | 2 | 0 | 9 | |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 1 | 2 | | 2 | 0 | 9 | | | | | | | | | | | | | |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card discount Candidate Name | <table border="1"> <tr> <td colspan="10">9.30</td> </tr> </table> | 9.30 | | | | | | | | | | | | | | | | | | | |
| 9.30 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

33.64

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) American Express | Transaction ID: D212016 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 360001 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 0 | 5 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 0 | 5 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card discount Candidate Name | <table border="1"> <tr> <td colspan="10">6.98</td> </tr> </table> | 6.98 | | | | | | | | | | | | | | | | | | | |
| 6.98 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) American Express | Transaction ID: D212017 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 360001 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 0 | 5 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 0 | 5 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card discount Candidate Name | <table border="1"> <tr> <td colspan="10">1.09</td> </tr> </table> | 1.09 | | | | | | | | | | | | | | | | | | | |
| 1.09 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) American Express | Transaction ID: D212020 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 360001 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 0 | 8 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 0 | 8 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card discount Candidate Name | <table border="1"> <tr> <td colspan="10">1.09</td> </tr> </table> | 1.09 | | | | | | | | | | | | | | | | | | | |
| 1.09 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

9.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 | Transaction ID: D212021 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 9 / 2 0 0 9</div> </div> |
| City Ft Lauderdale State FL Zip Code 33336-0001 Purpose of Disbursement credit card discount Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Amount of Each Disbursement this Period <div>6.98</div> <div>003</div> Category/ Type |
| B. Full Name (Last, First, Middle Initial) Artistic Photo Services LLC Mailing Address 115 N Kennedy Rd City Sterling State VA Zip Code 20164-2006 Purpose of Disbursement photographic services party fundraiser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D212040 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 2 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>250.00</div> <div>003</div> Category/ Type no federal candidate |
| C. Full Name (Last, First, Middle Initial) Auburn Quad Inc. Mailing Address PO Box 390728 City Cambridge State MA Zip Code 02139-0008 Purpose of Disbursement donor processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D212046 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 4 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>1.38</div> <div>003</div> Category/ Type |

SUBTOTAL of Disbursements This Page (optional)

258.36

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | | | | | | | | | | | | | | | | | | | | | |
|---|---|----------------------------------|---|---|------------------|----------------------------------|----------------------|---|--|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Bank Street Band | Transaction ID: D212061 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 13529 Ann Grigsby Cir | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 2 | 5 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 2 | 5 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| <table border="1"> <tr> <td>City Centreville</td> <td>State VA</td> <td>Zip Code 20120-2625</td> </tr> <tr> <td colspan="2">Purpose of Disbursement entertainment fund raising expense</td> <td rowspan="2"> <div>003</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table> | City Centreville | State VA | Zip Code 20120-2625 | Purpose of Disbursement entertainment fund raising expense | | <div>003</div> Category/ Type | Candidate Name | | Amount of Each Disbursement this Period <div>1440.00</div> | | | | | | | | | | | | |
| City Centreville | State VA | Zip Code 20120-2625 | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement entertainment fund raising expense | | <div>003</div> Category/ Type | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table> | Office Sought: | Disbursement For: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | | no federal candidate | | | | | | | | | | | | | | |
| Office Sought: | Disbursement For: | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Brooke Rental Center | Transaction ID: D212041 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 321 Mill St NE | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 1 | 2 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 1 | 2 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| <table border="1"> <tr> <td>City Vienna</td> <td>State VA</td> <td>Zip Code 22180-4525</td> </tr> <tr> <td colspan="2">Purpose of Disbursement dance floor rental party fundraiser</td> <td rowspan="2"> <div>003</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table> | City Vienna | State VA | Zip Code 22180-4525 | Purpose of Disbursement dance floor rental party fundraiser | | <div>003</div> Category/ Type | Candidate Name | | Amount of Each Disbursement this Period <div>918.00</div> | | | | | | | | | | | | |
| City Vienna | State VA | Zip Code 22180-4525 | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement dance floor rental party fundraiser | | <div>003</div> Category/ Type | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table> | Office Sought: | Disbursement For: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | | no federal candidate | | | | | | | | | | | | | | |
| Office Sought: | Disbursement For: | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) D&P Printing & Graphics, Inc. | Transaction ID: D212028 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 5641 General Washington Dr # 1 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 1 | 0 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 1 | 0 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| <table border="1"> <tr> <td>City Alexandria</td> <td>State VA</td> <td>Zip Code 22312-2403</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Party fundraising event flyer</td> <td rowspan="2"> <div>003</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table> | City Alexandria | State VA | Zip Code 22312-2403 | Purpose of Disbursement Party fundraising event flyer | | <div>003</div> Category/ Type | Candidate Name | | Amount of Each Disbursement this Period <div>744.45</div> | | | | | | | | | | | | |
| City Alexandria | State VA | Zip Code 22312-2403 | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Party fundraising event flyer | | <div>003</div> Category/ Type | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table> | Office Sought: | Disbursement For: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | | no federal candidate | | | | | | | | | | | | | | |
| Office Sought: | Disbursement For: | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

3102.45

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

D&P Printing & Graphics, Inc.

Mailing Address 5641 General Washington Dr
1

City Alexandria State VA Zip Code 22312-2403

Purpose of Disbursement
Party fundraising event program printing

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212029

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

446.25

no federal candidate

B.

Full Name (Last, First, Middle Initial)

D&P Printing & Graphics, Inc.

Mailing Address 5641 General Washington Dr
1

City Alexandria State VA Zip Code 22312-2403

Purpose of Disbursement
party fundraiser thank you cards printing

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212039

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

162.75

no federal candidate

C.

Full Name (Last, First, Middle Initial)

D&P Printing & Graphics, Inc.

Mailing Address 5641 General Washington Dr
1

City Alexandria State VA Zip Code 22312-2403

Purpose of Disbursement
sample ballot local election

Candidate Name

006
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212073

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

1194.00

SUBTOTAL of Disbursements This Page (optional)

1803.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

D&P Printing & Graphics, Inc.

Mailing Address 5641 General Washington Dr
1

City Alexandria State VA Zip Code 22312-2403

Purpose of Disbursement
precinct letters local election

Candidate Name

006
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212074

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

926.48

B.

Full Name (Last, First, Middle Initial)

D&P Printing & Graphics, Inc.

Mailing Address 5641 General Washington Dr
1

City Alexandria State VA Zip Code 22312-2403

Purpose of Disbursement
absentee letter local election

Candidate Name

006
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212075

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

319.20

C.

Full Name (Last, First, Middle Initial)

de Lage Landen Financial Services

Mailing Address 1111 Old Eagle School Rd

City Wayne State PA Zip Code 19087-1453

Purpose of Disbursement
copier lease

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212080

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

246.75

SUBTOTAL of Disbursements This Page (optional)

1492.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Discover Business Service Settlement | Transaction ID: D212015 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 30943 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 0 | 5 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 0 | 5 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Salt Lake City State UT Zip Code 84130-0943 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement credit card service fee Candidate Name | <table border="1"> <tr> <td colspan="10">19.10</td> </tr> </table> | 19.10 | | | | | | | | | | | | | | | | | | | |
| 19.10 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Intuit, Inc | Transaction ID: D212053 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 2946 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 1 | 6 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 1 | 6 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Phoenix State AZ Zip Code 85062-2946 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Software upgrade Candidate Name | <table border="1"> <tr> <td colspan="10">755.79</td> </tr> </table> | 755.79 | | | | | | | | | | | | | | | | | | | |
| 755.79 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Jimmy's Old Town Tavern | Transaction ID: D212062 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 697 Spring St | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 2 | 5 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 2 | 5 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Herndon State VA Zip Code 20170-5125 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement catering fundraising expense Candidate Name | <table border="1"> <tr> <td colspan="10">9803.75</td> </tr> </table> | 9803.75 | | | | | | | | | | | | | | | | | | | |
| 9803.75 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

10578.64

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Jimmy's Old Town Tavern

Mailing Address 697 Spring St

City
HerndonState
VAZip Code
20170-5125Purpose of Disbursement
catering fundraising expense

Candidate Name

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212063

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 2 | 5 | | 2 | 0 | 0 | 9 |

Amount of Each Disbursement this Period

252.95

no federal candidate

B.

Full Name (Last, First, Middle Initial)

Mark Richards

Mailing Address 18108 Camdenhurst Dr

City
GainesvilleState
VAZip Code
20155-6240Purpose of Disbursement
Graphics February newsletter

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212079

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 2 | 9 | | 2 | 0 | 0 | 9 |

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)

Merchant Service

Mailing Address 10855 Fairfax Blvd
c/o World Bankcard ServicesCity
FairfaxState
VAZip Code
22030-4300Purpose of Disbursement
credit card processing fees

Candidate Name

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212014

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | | 0 | 5 | | 2 | 0 | 0 | 9 |

Amount of Each Disbursement this Period

572.95

SUBTOTAL of Disbursements This Page (optional)

1225.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

MidPhase Hosting Services, Inc.

Mailing Address 223 W Jackson Blvd
Attn 101

City Chicago State IL Zip Code 60606-6908

Purpose of Disbursement
website hosting charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212025

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

149.85

B.

Full Name (Last, First, Middle Initial)

MidPhase Hosting Services, Inc.

Mailing Address 223 W Jackson Blvd
Attn 101

City Chicago State IL Zip Code 60606-6908

Purpose of Disbursement
website hosting charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212077

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

149.85

C.

Full Name (Last, First, Middle Initial)

Ms. Kristen Alcorta

Mailing Address 3029 N Westmoreland St

City Arlington State VA Zip Code 22213-1806

Purpose of Disbursement
Fund raising expense - t shirts

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212045

Date of Disbursement

01 / 14 / 2009

Amount of Each Disbursement this Period

472.00

no federal candidate

SUBTOTAL of Disbursements This Page (optional)

771.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 39 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | |
|--|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Nauticon</p> <p>Mailing Address 15878 Gaither Dr Gaithersburg MD</p> <p>City Gaithersburg State MD Zip Code 20877-1404</p> <p>Purpose of Disbursement copier maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D212036</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 0 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>138.15</div> </div> </p> <p>Category/Type <div> <div>001</div> <div>Category/Type</div> </div> </p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Nauticon</p> <p>Mailing Address 15878 Gaither Dr Gaithersburg MD</p> <p>City Gaithersburg State MD Zip Code 20877-1404</p> <p>Purpose of Disbursement copier maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D212078</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 9 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>904.02</div> </div> </p> <p>Category/Type <div> <div>001</div> <div>Category/Type</div> </div> </p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <p>Mailing Address 1225 I St NW Ste 1225</p> <p>City Washington State DC Zip Code 20005-5918</p> <p>Purpose of Disbursement accounting and donor database servi</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D212037</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 0 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div> <div></div> <div>1050.00</div> </div> </p> <p>Category/Type <div> <div>001</div> <div>Category/Type</div> </div> </p> |

SUBTOTAL of Disbursements This Page (optional)

2092.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Northern Virginia Community College

Mailing Address Ernst Cultural Center 8333 Little

City
Annandale

State
VA

Zip Code
22003

Purpose of Disbursement
space rental party fundraiser

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212066

Date of Disbursement

01 / 28 / 2009

Amount of Each Disbursement this Period

280.00

no federal candidate

B.

Full Name (Last, First, Middle Initial)

Nancy Alexander Simmons

Mailing Address 6112 Emmett Guards Ct

City
Fairfax Station

State
VA

Zip Code
22039-1302

Purpose of Disbursement
donated space for party fundraiser

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: D213602

Date of Disbursement

01 / 26 / 2009

Amount of Each Disbursement this Period

1000.00

* In-Kind Received

C.

Full Name (Last, First, Middle Initial)

Springfield Golf and Country Club

Mailing Address 8301 Old Keene Mill Rd

City
Springfield

State
VA

Zip Code
22152-2430

Purpose of Disbursement
Room rental party fundraising

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212031

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

3336.25

no federal candidate

SUBTOTAL of Disbursements This Page (optional)

4616.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Sprint

Mailing Address PO Box 8077

City
London

State
KY

Zip Code
40742-8077

Purpose of Disbursement
Blackberry monthly service

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212019

Date of Disbursement

01 / 06 / 2009

Amount of Each Disbursement this Period

106.94

B.

Full Name (Last, First, Middle Initial)

TM 2815, LLC

Mailing Address Michael Nguyen PO Box 5141

City
Springfield

State
VA

Zip Code
22150-5141

Purpose of Disbursement
December lease space and utilities

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212026

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

3599.25

C.

Full Name (Last, First, Middle Initial)

TM 2815, LLC

Mailing Address Michael Nguyen PO Box 5141

City
Springfield

State
VA

Zip Code
22150-5141

Purpose of Disbursement
January lease space and utilities

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212027

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

3599.25

SUBTOTAL of Disbursements This Page (optional)

7305.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) TM 2815, LLC | Transaction ID: D212082 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address Michael Nguyen PO Box 5141 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 2 | 9 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 2 | 9 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Springfield State VA Zip Code 22150-5141 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement February lease space and utilities Candidate Name | <table border="1"> <tr> <td colspan="10">3599.25</td> </tr> </table> | 3599.25 | | | | | | | | | | | | | | | | | | | |
| 3599.25 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) US Postal Service - Merrifield | Transaction ID: D212057 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 8409 Lee Hwy | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 2 | 3 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 2 | 3 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Merrifield State VA Zip Code 22081-1000 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement precinct letters non federal electi Candidate Name | <table border="1"> <tr> <td colspan="10">3367.66</td> </tr> </table> | 3367.66 | | | | | | | | | | | | | | | | | | | |
| 3367.66 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) US Postal Service - Merrifield | Transaction ID: D212018 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 8409 Lee Hwy | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 0 | 6 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 0 | 6 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Merrifield State VA Zip Code 22081-1000 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Party fundraising event postage Candidate Name | <table border="1"> <tr> <td colspan="10">650.00</td> </tr> </table> | 650.00 | | | | | | | | | | | | | | | | | | | |
| 650.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ no federal candidate | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

7616.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 17577 | Transaction ID: D212030 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 0 / 2 0 0 9</div> </div> |
| City Baltimore State MD Zip Code 21297-0513 Purpose of Disbursement telephone services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Amount of Each Disbursement this Period <div>382.78</div> <div>001</div> Category/ Type |
| B. Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 17577 City Baltimore State MD Zip Code 21297-0513 Purpose of Disbursement telephone services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D212072 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 9 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>422.85</div> <div>001</div> Category/ Type |
| C. Full Name (Last, First, Middle Initial) Virginia ABC Mailing Address PO Box 27491 City Richmond State VA Zip Code 23261-7491 Purpose of Disbursement party fundraiser liquor license Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D212013 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 2 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>55.00</div> <div>003</div> Category/ Type no federal candidate |

SUBTOTAL of Disbursements This Page (optional)

860.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 44 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Virginia Commerce Bank | Transaction ID: D212044 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 5350 Lee Hwy | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 1 | 3 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 1 | 3 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Arlington State VA Zip Code 22207-1608 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement bank service charge Candidate Name | <table border="1"> <tr> <td colspan="10">30.00</td> </tr> </table> | 30.00 | | | | | | | | | | | | | | | | | | | |
| 30.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Vonage | Transaction ID: D212022 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 23 Main St | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 0 | 9 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 0 | 9 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Holmdel State NJ Zip Code 07733-2136 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement telephone services Candidate Name | <table border="1"> <tr> <td colspan="10">62.44</td> </tr> </table> | 62.44 | | | | | | | | | | | | | | | | | | | |
| 62.44 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Vonage | Transaction ID: D212023 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 23 Main St | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 0 | 9 | | 2 | 0 | 0 | 9 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 1 | | 0 | 9 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | |
| City Holmdel State NJ Zip Code 07733-2136 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement telephone services Candidate Name | <table border="1"> <tr> <td colspan="10">4718.88</td> </tr> </table> | 4718.88 | | | | | | | | | | | | | | | | | | | |
| 4718.88 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

4811.32

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | |
|--|---|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Vonage</p> <p>Mailing Address 23 Main St</p> <p>City Holmdel State NJ Zip Code 07733-2136</p> <p>Purpose of Disbursement telephone services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D212024</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 9 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>40.46</div> </p> <p>Category/Type <div>001</div> </p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Laura Austin Sonnenmark</p> <p>Mailing Address 9114 Volunteer Dr</p> <p>City Alexandria State VA Zip Code 22309-2923</p> <p>Purpose of Disbursement volunteer party food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D212032</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 0 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>84.55</div> </p> <p>Category/Type <div>001</div> </p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Safeway Store # 1283</p> <p>Mailing Address 8646 Richmond Hwy</p> <p>City Alexandria State VA Zip Code 22309-4205</p> <p>Purpose of Disbursement volunteer party food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D212089</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 0 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>84.55</div> </p> <p>Category/Type <div>001</div> </p> <p>[MEMO ITEM]</p> |

SUBTOTAL of Disbursements This Page (optional)

125.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Laura Austin Sonnenmark

Mailing Address 9114 Volunteer Dr

City
Alexandria

State
VA

Zip Code
22309-2923

Purpose of Disbursement
volunteer party food

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212033

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

380.57

B.

Full Name (Last, First, Middle Initial)

Costco Newington Springfield

Mailing Address 7373 Boston Blvd

City
Springfield

State
VA

Zip Code
22153-2805

Purpose of Disbursement
volunteer party food

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212088

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

380.57

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Laura Austin Sonnenmark

Mailing Address 9114 Volunteer Dr

City
Alexandria

State
VA

Zip Code
22309-2923

Purpose of Disbursement
volunteer party mailing labels

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212034

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

27.99

SUBTOTAL of Disbursements This Page (optional)

408.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 47 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Staples Richmond Highway

Mailing Address 7708 Richmond Hwy

City

Alexandria

State

VA

Zip Code

22306-2803

Purpose of Disbursement

volunteer party mailing labels

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: D212087

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

27.99

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Ms. Janet Louise Myhre

Mailing Address 4012 Woodley Dr

City

Alexandria

State

VA

Zip Code

22309-2541

Purpose of Disbursement

projector for party training

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: D212038

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

682.49

C.

Full Name (Last, First, Middle Initial)

Staples Mount Vernon Plaza

Mailing Address 7708 Richmond Hwy

City

Alexandria

State

VA

Zip Code

22306-2803

Purpose of Disbursement

projector for party training

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: D212086

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

682.49

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

682.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 48 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Carole Burk

Mailing Address 10150 Hampton Rd

City
Fairfax Station

State
VA

Zip Code
22039-2722

Purpose of Disbursement
tablecloths for party fundraiser

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212065

Date of Disbursement

01 / 28 / 2009

Amount of Each Disbursement this Period

212.45

B.

Full Name (Last, First, Middle Initial)

Reliable Paper, Inc.

Mailing Address 1030 Northpoint Pkwy SE
A

City
Acworth

State
GA

Zip Code
30102-3133

Purpose of Disbursement
tablecloths party fundraiser

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212085

Date of Disbursement

01 / 28 / 2009

Amount of Each Disbursement this Period

212.45

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Ruth Kristine Miller

Mailing Address 9102 Sweet Spice Ct

City
Springfield

State
VA

Zip Code
22152-2514

Purpose of Disbursement
party fundraiser t-shirts

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212076

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

1174.97

SUBTOTAL of Disbursements This Page (optional)

1387.42

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 49 / 55

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Kennedy Graphics, Inc.

Mailing Address PO Box 1000

City
Lees Summit

State
MO

Zip Code
64063-8000

Purpose of Disbursement
party fundraiser t-shirts

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212084

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2009

Amount of Each Disbursement this Period

1174.97

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

49499.67

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 50 / 55

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Sharon Bulova For Chairman

Mailing Address P O Box 19

City
Fairfax Station

State
VA

Zip Code
22039

Purpose of Disbursement
County Committee Contribution

Candidate Name
Sharon Bulova For Chairman

008
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212058

Date of Disbursement

01 / 25 / 2009

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Sharon Bulova For Chairman

Mailing Address P O Box 19

City
Fairfax Station

State
VA

Zip Code
22039

Purpose of Disbursement
Womens Committee contribution

Candidate Name
Sharon Bulova For Chairman

008
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212059

Date of Disbursement

01 / 25 / 2009

Amount of Each Disbursement this Period

800.00

C.

Full Name (Last, First, Middle Initial)

Sharon Bulova For Chairman

Mailing Address P O Box 19

City
Fairfax Station

State
VA

Zip Code
22039

Purpose of Disbursement
Mt. Vernon Committee Contribution

Candidate Name
Sharon Bulova For Chairman

008
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212060

Date of Disbursement

01 / 25 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

6300.00

TOTAL This Period (last page this line number only)

6300.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Carefirst Blue Cross Blue Shield

Mailing Address PO Box 79749

City
Baltimore

State
MD

Zip Code
21279-0749

Purpose of Disbursement
employee health insurance premium

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212081

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

209.00

B.

Full Name (Last, First, Middle Initial)

Carefirst Blue Cross Blue Shield

Mailing Address PO Box 79749

City
Baltimore

State
MD

Zip Code
21279-0749

Purpose of Disbursement
employee health insurance premium

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212035

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

209.00

C.

Full Name (Last, First, Middle Initial)

Advantage Business Payroll

Mailing Address Auburn Branch P O Box 1330 Auburn

City
Auburn

State
ME

Zip Code
04211-1330

Purpose of Disbursement
wages & salaries

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212048

Date of Disbursement

01 / 15 / 2009

Amount of Each Disbursement this Period

1249.04

SUBTOTAL of Disbursements This Page (optional)

1667.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Mike J Burns

Mailing Address 9035 Andromeda Dr

City
Burke

State
VA

Zip Code
22015-3507

Purpose of Disbursement
Wages and salaries

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D213500

Date of Disbursement

01 / 15 / 2009

Amount of Each Disbursement this Period

1249.04

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Advantage Business Payroll

Mailing Address Auburn Branch P O Box 1330 Auburn

City
Auburn

State
ME

Zip Code
04211-1330

Purpose of Disbursement
employee taxes

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212049

Date of Disbursement

01 / 15 / 2009

Amount of Each Disbursement this Period

481.73

C.

Full Name (Last, First, Middle Initial)

Mike J Burns

Mailing Address 9035 Andromeda Dr

City
Burke

State
VA

Zip Code
22015-3507

Purpose of Disbursement
Employee taxes

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D213499

Date of Disbursement

01 / 15 / 2009

Amount of Each Disbursement this Period

481.73

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

481.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Advantage Business Payroll | Transaction ID: D212050 Date of Disbursement |
| Mailing Address Auburn Branch P O Box 1330 Auburn | <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 9</div> </div> |
| City Auburn State ME Zip Code 04211-1330 | Amount of Each Disbursement this Period |
| Purpose of Disbursement employer taxes Candidate Name | <div> <div>189.87</div> <div>001 Category/ Type</div> </div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) Mike J Burns | Transaction ID: D213498 Date of Disbursement |
| Mailing Address 9035 Andromeda Dr | <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 9</div> </div> |
| City Burke State VA Zip Code 22015-3507 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Employer taxes Candidate Name | <div> <div>189.87</div> <div>001 Category/ Type</div> </div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Advantage Business Payroll | Transaction ID: D212069 Date of Disbursement |
| Mailing Address Auburn Branch P O Box 1330 Auburn | <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 9 / 2 0 0 9</div> </div> |
| City Auburn State ME Zip Code 04211-1330 | Amount of Each Disbursement this Period |
| Purpose of Disbursement wages & salaries Candidate Name | <div> <div>3638.80</div> <div>001 Category/ Type</div> </div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

3828.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Mike J Burns

Mailing Address 9035 Andromeda Dr

City
Burke

State
VA

Zip Code
22015-3507

Purpose of Disbursement
Wages and salaries

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D213575

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

3638.80

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Advantage Business Payroll

Mailing Address Auburn Branch P O Box 1330 Auburn

City
Auburn

State
ME

Zip Code
04211-1330

Purpose of Disbursement
employee taxes

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212070

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

1691.97

C.

Full Name (Last, First, Middle Initial)

Mike J Burns

Mailing Address 9035 Andromeda Dr

City
Burke

State
VA

Zip Code
22015-3507

Purpose of Disbursement
Employee taxes

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D213574

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

1691.97

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1691.97

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Advantage Business Payroll

Mailing Address Auburn Branch P O Box 1330 Auburn

City Auburn State ME Zip Code 04211-1330

Purpose of Disbursement
employer taxes

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212071

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

550.48

B.

Full Name (Last, First, Middle Initial)

Mike J Burns

Mailing Address 9035 Andromeda Dr

City Burke State VA Zip Code 22015-3507

Purpose of Disbursement
Employer taxes

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D213573

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

550.48

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

550.48

TOTAL This Period (last page this line number only)

8219.89